

August 9, 2010

Dear Partner in Health:

Diabetes in Indiana has emerged as one of the most prevalent and costly diseases affecting our state. In 2007, diabetes was the 7th leading cause of death in Indiana. It was the 4th leading cause of death for Blacks, 7th for Whites, and 8th for Hispanics. Hoosiers living with this disease face a lower quality of life, shorter life expectancy, and higher healthcare costs. It is estimated that almost 600,000 adults in Indiana have diabetes. Unfortunately, there is also a growing trend of children and adolescents developing the disease.

To help combat this preventable epidemic, we would like to invite you to become a member of the **Indiana Diabetes Advisory Council (DAC)**. DAC's mission is to reduce the burden of diabetes in Indiana through a network of statewide partnerships directed towards this common goal. DAC offers a forum for the professional exchange of knowledge and skills related to statewide diabetes prevention and control and is comprised of a variety of stakeholders including diabetes service organizations, public and private health systems, health plans, clinicians, individuals with diabetes, the business community, community-based organizations, pharmaceutical companies, academia, and others.

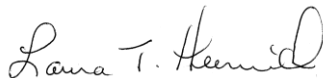
There is no cost for membership.

DAC members can get involved in a variety of ways including attending quarterly meetings, serving on the Steering (Leadership) Committee, and chairing or participating in a committee (committees focus areas include Education and Health Services, Primary Prevention, Advocacy & Partnerships, and Data, Surveillance & Evaluation).

For more information about DAC, please see the attached description or visit our website at <http://www.in.gov/isdh/19709.htm>.

If you would like to become a member, please contact Manisha Singhal at msinghal@isdh.IN.gov for a membership application. Thank you for your interest, and we look forward to working with you!

Sincerely,



Laura Heinrich, RD, CD
Diabetes Prevention and Control Program Director



Manisha Singhal, MPH
Program Coordinator

About the Indiana Diabetes Council (DAC)

The DAC's mission is to reduce the diabetes burden in Indiana through the development, implementation and evaluation of a comprehensive State Plan that addresses diabetes care across the continuum from primary prevention to managed care. The mission will be accomplished through the collaborative efforts of a network of stakeholders throughout the state including diabetes service organizations, public and private health systems, health plans, clinicians, individuals with diabetes, the business community, community-based organizations, pharmaceutical companies, universities and research entities, community members, advocates and educators, and other entities working toward a common goal.

2010-11 DAC Meeting Schedule

The meeting schedule for 2010-11 is as follows:

- Thursday, Oct 14, 2010
- Wednesday, Jan 26, 2011
- Wednesday, April 27, 2011
- Wednesday, July 27, 2011
- Wednesday, Oct 26, 2011

All meetings will take place at the Indiana State Department of Health (2 N. Meridian St., Indianapolis, IN, 46204) in the Rice Auditorium (Lower Level) from 1-4 pm. In-person attendance is highly encouraged, although a conference call option is available.

DAC Committees

- **Education & Health Services**
Inform and educate people about diabetes health issues; assure a competent diabetes health care workforce; assess and promote linking people to needed diabetes health services; assess the availability of diabetes health care services to the state's population; inform policy makers of barriers to accessing diabetes services within the state; and assist communities in developing programs to improve access.
- **Primary Prevention**
Educate and increase the number of providers utilizing appropriate diagnostic screening tests for at-risk patients; support pre-diabetes clinical screening guidelines as recommended by the ADA; promote provider and community awareness on diabetes prevention through referrals into appropriate screening and wellness programs; support policies, systems, and environmental changes to promote healthy lifestyles.
- **Advocacy & Partnerships**
Support and enhance the strategic priorities of the Diabetes State Plan to promote diabetes prevention and control efforts and inform state and systems' policy; mobilize partnerships and build constituencies who can identify diabetes priorities and create effective solutions; and build statewide partnerships and provide assistance to partners and communities to organize and take action to improve diabetes health outcomes in their local communities.
- **Data, Surveillance & Evaluation**
Identify and make accessible diabetes data; create a state health profile; compile and provide data to organizations for program planning and evaluation; monitor progress toward State Plan objectives; assess whether State Plan components are producing the desired progress on outcomes; identify comparisons among groups, particularly among populations with disproportionately high risk factors and adverse health outcomes; justify the need for further funding and support; and find opportunities for continuous quality improvement.